

Application Data Sheet

APPLICATION INFORMATION

Application Number::
Filing Date:: November 12, 2003
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?:: No
Number of Copies of CRF::
Title:: TRANSMITTER AND RECEIVER CIRCUITS
WITH CONTROLLER-LESS OPERATION
CAPABILITY
Attorney Docket Number:: P1978US
Request for Early Publication?:: No
Request for Non-Publication?:: Yes
Suggested Drawing Figure::
Total Drawing Sheets:: 4
Small Entity?:: No
Latin Name::
Variety denomination name::
Petition Included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers::
Secrecy Order in Parent Appl.?:: No

APPLICANT INFORMATION

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Wayne
Middle Name:: T.
Family Name:: Holcombe
City of Residence:: Mountain View
State or Prov. of Residence:: California
Country of Residence:: US
Street of mailing address:: 1348 Isabelle Avenue
City of mailing address:: Mountain View
State or Province of mailing address:: California
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Hungary
Status:: Full Capacity
Given Name:: András
Middle Name::
Family Name:: Hegyi
City of Residence:: Székesfehérvár
State or Prov. of Residence::
Country of Residence:: Hungary
Street of mailing address:: Vértanú u. 41
City of mailing address:: Székesfehérvár
State or Province of mailing address::
Country of mailing address:: Hungary
Postal or Zip Code of mailing address:: 8000

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Hungary
Status:: Full Capacity
Given Name:: Tibor
Middle Name::
Family Name:: Keller
City of Residence:: Budakeszi
State or Prov. of Residence::
Country of Residence:: Hungary
Street of mailing address::
City of mailing address:: Budakeszi
State or Province of mailing address:: Székely u. 16
Country of mailing address:: Hungary
Postal or Zip Code of mailing address:: 2092

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Hungary
Status:: Full Capacity
Given Name:: Vince
Middle Name:: A.
Family Name:: Horváth
City of Residence:: Budapest
State or Prov. of Residence::
Country of Residence:: Hungary
Street of mailing address:: Caprera u. 5
City of mailing address:: Budapest
State or Province of mailing address::
Country of mailing address:: Hungary
Postal or Zip Code of mailing address:: 1164

Applicant Authority Type:: Inventor
Primary Citizenship Country:: The Netherlands
Status:: Full Capacity
Given Name:: Matthijs
Middle Name:: D.
Family Name:: Pardoen
City of Residence:: Mountain View
State or Prov. of Residence:: California
Country of Residence:: US
Street of mailing address:: 319 Thompson Avenue
City of mailing address:: Mountain View
State or Province of mailing address:: California
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94043

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Hungary
Status:: Full Capacity
Given Name:: János
Middle Name::
Family Name:: Erdélyi
City of Residence:: Dunakeszi
State or Prov. of Residence::
Country of Residence:: Hungary
Street of mailing address:: Bródy Sándor u. 5
City of mailing address:: Dunakeszi
State or Province of mailing address::
Country of mailing address:: Hungary
Postal or Zip Code of mailing address:: 2120

CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 08968
Phone:: 312-644-3000
Fax:: 312-644-3381
E-mail Address:: ipdocket@gcd.com

REPRESENTATIVE INFORMATION

Representative Customer Number: 08968

Representative Designation: Registration Number: Representative Name:

DOMESTIC PRIORITY INFORMATION

Application:	Continuity Type:	Parent Application:	Parent Filing Date:
This application	claiming the benefit under 35 USC 119(e)	60/425,473	12 November 2002

FOREIGN APPLICATION INFORMATION

Country: Application Number: Filing Date: Priority Claimed

ASSIGNEE INFORMATION

Assignee name:: Integration Associates Inc.
Street of mailing address:: 110 Pioneer Way, Unit L
City of mailing address:: Mountain View
State or Province of mailing address:: California
Country of mailing address:: US
Postal or Zip Code of mailing address:: 94040

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